## BEST AVAILABLE COPY

|  |                             |  |                    | Application or Docket Number |            |                     |                         |  |
|--|-----------------------------|--|--------------------|------------------------------|------------|---------------------|-------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOI<br>Effective October 1, 2000  |                             |  |                    | o9909427                     |            |                     |                         |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                             |  | SMALI<br>TYPE      | SMALL ENTITY TYPE OR         |            |                     | OTHER THAN SMALL ENTITY |  |
| TOTAL CLAIMS   | 19                          |  | RAT                | E FEE                        | ]          | RATE                | FEE                     |  |
| FOR  | NUMBER FILED                | NUMBER EXTRA   | BASIC              | FEE 355.00                   | OR         | BASIC FEE           | 710.00                  |  |
| TOTAL CHARGEABLE CLAIMS  | / 9/ minus 20=              | · A  | X\$ 9              | 9=                           | OR         | X\$18=              |                         |  |
| INDEPENDENT CLAIMS   | / minus 3 =                 | * p  | X40                | )=                           | OR         | X80=                |                         |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |                             |  | +13                | 5=                           | OR         | +270=               |                         |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |                             |  |                    | AL                           | OR         | TOTAL               | 710                     |  |
| CLAIMS AS AMENDED - PART II  |                             |  |                    |                              |            | OTHER               | *                       |  |
| (Column 1)   |                             | mn 2) (Column 3  | SMA                | LL ENTITY                    | OR<br>T    | SMALL               | Ca Kit                  |  |
| REMAINING AFTER AMENDMENT  Total Independent FIRST PRESENTATION OF M   | NUM<br>PREVI                | MBER PRESENT OUSLY EXTRA   | RAT                | ADDI-<br>E TIONAL<br>FEE     |            | RATE                | ADDI-<br>TIONAL<br>FEE  |  |
| Total  | Minus **                    | =  | X\$ 9              | 9=                           | OR         | X\$18≐              |                         |  |
| independent .  | Minus ***                   | =  | X40                | )=                           | OR         | X80=                |                         |  |
| FIRST PRESENTATION OF M  | ULTIPLE DEPENDEN            | ment of National Association of the State of | <b>」</b><br>↓ ∓13! | 5= 1                         | OR         | +270=               |                         |  |
|  |                             |  | TC<br>ADDIT.       | TAL<br>FEE                   | OR         | TOTAL<br>ADDIT: FEE | 数是核製                    |  |
| (Column 1)   |                             | mn 2) (Column 3  | <u> </u>           |                              |            |                     |                         |  |
| REMAINING AFTER AMENDMENT Total  Total  Total  | NUM<br>& PREVI              | HEST MBER PRESENT OUSLY EXTRA  | RAT                | ADDI-<br>E TIONAL<br>FEE     |            | RATE                | ADDI:<br>TIONAL<br>FEE  |  |
| Total  | Minus **                    | =  | X\$ 9              | 9=                           | OR         | X\$18=              |                         |  |
| Independent .  | Minus.                      | T CLANA  | . X40              | )=   (x )                    | OR         | X80=                |                         |  |
| FIRST PRESENTATION OF M  | OLITE DEPENDEN              | I CLAIM  | +135               | 5= 1.7.4.                    | OR         | +270=               |                         |  |
|  |                             | •  | TO<br>ADDIT.       | TAL<br>FEE                   | OR         | TOTAL<br>ADDIT: FEE | <b>维持</b> 主义。"          |  |
| (Column 1)   |                             | mn 2) (Column 3  |                    |                              | (* j.)<br> |                     |                         |  |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF M   | NUM<br>PREVI                | HEST MBER PRESENT OUSLY EXTRA  | RAT                | ADDI-<br>E TIONAL<br>FEE     |            | RATE                | ADDI-<br>TIONAL<br>FEE  |  |
| Total •  | Minus **                    | =  | X\$ 9              |                              | OR         | X\$18=              |                         |  |
| independent *  | Minus ***                   | =  | X40                | =                            | OR         | X80=                |                         |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                             |  |                    |                              | 1          |                     |                         |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |                             |  |                    | D=                           | OR         | +270=               |                         |  |
| of the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEEOR ADDIT. FEE |                             |  |                    |                              |            |                     | <u></u>                 |  |
| The "Highest Number Previously Pa  | aid For" (Total or Independ | dent) is the highest numb  | per found in th    | ne appropriate bo            | x in co    | lumn 1.             |                         |  |